

**Comments for Draft Guideline for the Prevention and Control of Norovirus
Gastroenteritis Outbreaks in Healthcare Settings
Federal Register due July 16, 2010**

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**Key question 1 What person, virus or environmental characteristics
increase or decrease the risk of norovirus infection in healthcare settings?**

1. Section 1. A. 1 "Avoid exposure of vomitus or diarrhea. For a recognized outbreak, use contact precautions for patients with symptoms consistent with norovirus gastroenteritis. Sporadic cases can be managed under Standard Precautions with provision to reduce staff, visitor, and patient exposures to vomitus or diarrhea."

This implies that there is constant monitoring by senior nursing staff or infection control staff to increase the precautions as needed. It may be a standard but it puts the HCW at risk to rely on others to determine when to change precautions.

2. Section 3. C.2 a "use a surgical or procedure mask, and eye protection if there is a risk of splashes to the face during the care of patients, particularly among those who are vomiting."

Standard precautions rely on worker judgment in the event of exposure to don PPE. Norovirus can be aerosolized in vomit and the data in the document support at least twice the risk of illness for persons exposed to vomit. (Reference page 30 Q1.c4 Proximity to infected persons). "Eight observational studies found statistically significant factors that elevate the risk of infection such as proximate exposure to an infected source within households or in crowded quarters increased infection risk, as did exposures to any or frequent vomiting episodes. These data suggest person-to-person transmission is dependent on close or direct contact as well as shorter-range aerosol exposures. "

Standard precautions work when the vomiting is in progress or just after vomiting, but there is a risk for the health care worker (HCW) who goes in to care for a vomiting patient, clean a toilet, sink or area soiled with or without vomit, but it is unknown when the vomiting occurred. Visually it is present, but aerosolization may or may not be present. The risk that a health care worker (HCW) touches the virus or has the virus on mucus membranes is possible.